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T-609 P.001 F-105

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PATENT, TRADEMARK
AND COPYRIGHT LAW
FACSIMILE: (703) 684-1157

AUG 03 2005

Date: August 3, 2005

FACSIMILE COVER LETTER

Facsimile Number: 571-273-8300

To: Examiner D. LEE
Group Art Unit 2876, USPTO

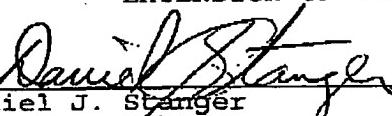
From: Mr. Daniel J. Stanger
MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re: USSN 10/673,451
Attorney Docket No.: ASA-1005-02

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

PTO-1083 TRANSMITTAL;
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PETITION FOR THREE-MONTH EXTENSION OF TIME; AND
CREDIT CARD FORM INCLUDING \$1,150.00 IN PAYMENT
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Daniel J. Stanger
Reg. No. 32,846

August 3, 2005

Date

Total Number of Pages (including cover sheet): 14

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FORM PTO-1083

PATENT

Case Docket No. ASA-1005-02

**RECEIVED
CENTRAL FAX CENTER**

In RE application of C. OKAMOTO et al
Serial No.: 10/673,451

Group Art Unit: 2876

AUG 03 2005

Filed: September 30, 2003

Examiner: D. Lee

For: METHOD OF CHECKING AUTHENTICITY OF SHEET WITH BUILT-IN
ELECTRONIC CIRCUIT CHIP

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

| (COL. 1) | (COL. 2) | (COL. 3) |
|--|---------------------------------|---------------|
| Claims Remaining After Amendment | Highest No. Previously Paid For | Present Extra |
| Total • 6 | Minus -- 20 | = 0 |
| <input type="checkbox"/> First Presentation of Multiple Dependent Claims | | |

| SMALL ENTITY | |
|--------------|----------------|
| Rate | Additional Fee |
| x 9 | \$ |
| x 42 | \$ |
| + 140 | \$ |
| Total | \$ |

OR

| OTHER THAN A SMALL ENTITY | |
|---------------------------|----------------|
| Rate | Additional Fee |
| x 18 | \$ 0 |
| x 84 | \$ 0 |
| + 280 | \$ 0 |
| Total | \$ 0 |

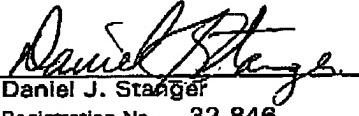
OR

- * If the entry in Col. 1 is less than the entry in Col. 2, write '0' in Col. 3.
 ** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, write '20' in this space.
 *** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, write '3' in this space.
 The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-1417 in the amount of \$ _____.
- A check in the amount of \$ 1,150.00 is attached in payment of:
CREDIT CARD FORM FOR 3M EXT OF TIME & TERM DIS FEE .
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1417.
- Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- Any patent application processing fees under 37 CFR 1.17.
- Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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By:


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Attorney for Applicant(s)

Date: August 3, 2005